14

Public Health Infrastructure

Goal

Ensure that the public health infrastructure at the state and local levels has the capacity to provide essential public health services.

Overview

A strong and competent public health workforce is vital to protecting and promoting the health of Kentuckians as well as the health of our local communities. Kentucky's public health workforce provides essential services in the areas of disease surveillance and investigation; monitoring the safety and cleanliness of restaurants and other public establishments, protecting us against environmental hazards, educating the public in healthy lifestyles and disease prevention, and responding to disasters and other emergencies. Recent disasters (Hurricanes Katrina and Rita) have made it apparent that a well organized and well functioning public health workforce is essential in disaster planning and recovery.

Summary of Progress

Kentucky's public health workforce has entered the 21st century better equipped and better trained. State general funds appropriated by Kentucky's Legislature in the 2000-2002 Biennium provided training to local health departments to transition from clinical services to population-based services. A multi-disciplinary team of training coordinators implemented a competency-based curriculum using the core public health functions and essential services as a guide. The Department for Public Health partnered with four universities for needs assessments and curriculum development and implementation. Additionally, the funding provided a base of support for the Kentucky Public Health Leadership Institute (KPHLI) at the University of Kentucky. This Institute provides special training and mentoring for state and local public health workers.

During this time, Kentucky also applied for and received several grants relating to bioterrorism and other public health emergencies. These funds significantly bolstered the state's epidemiological expertise and ability to respond to a disaster or bioterrorism event. (Kentucky sent several teams of professionals to assist in the aftermath of Hurricanes Katrina and Rita.)

Kentucky is also well on its way in establishing the Kentucky Electronic Public Health Records System (KYEPHRS). Through KYEPHRS, an electronic record will be initiated on all babies born in Kentucky beginning in FY 2006. This electronic information system will give health care professionals improved additional information on the health status of Kentuckians, and as a result, facilitate better care. Any contact with a health care facility or provider will initiate an update on the child's electronic record. Through the availability of federal and state funds, Kentucky has been able to bring its public health information (IT) systems into the 21st century.

Progress toward Achieving Each HK 2010 Objective

Summary of Objectives for Public Health Infrastructure	Baseline	HK 2010 Target	Mid- Decade Status	Progress	Data Source
14.1. (Developmental) Increase to 100% the number of local health departments (LHDs) that incorporate specific competencies for public health workers into the public health personnel system.	Not established	100%	TBD	TBD	Survey of LHDs in FY 2007
14.2. (Developmental) Increase the number of schools training public health workers that integrate specific training in the essential public health services into their curricula.	Four schools of public health include training; Of nursing schools surveyed, no training included (2005)	Higher than baseline	Same as baseline	N/A	Survey of Schools of Public Health and Nursing Schools
14.3. (Developmental) Increase by 10 percent the number of public health agencies that provide continuing education and training to 100 percent of their employees to improve performance of the essential public health services.	100% (2001- 2002)	100%	TBD	TBD	Survey of Public Health Agencies
14.4. The state and all local health departments will provide onsite access to data via electronic systems and online information systems such as the Internet.	Few LHDs had onsite access (1999)	Access Provided	DPH and all LHDs have onsite access (2005)	Yes	Survey of LHDs and DPH
14.5R. To assure accessibility by the public to public health information and surveillance data via the internet while maintaining privacy, confidentiality, and security.	Limited KY public health data on internet (1999)	Assure accessi- bilty to the public	All libraries have internet to public free of charge. CHFS now has an internet site that contains public health data	Yes	Review and mainte- nance of CHFS website
14.6. Increase to 100 percent the proportion of <i>Healthy Kentuckians 2010</i> objectives that can be tracked for select populations.	62.8% (2005)	100%	62.8% (2005)	Yes	HK 2010 Mid- Decade Review

R = Revised Objective

N/A = Only baseline data are available. Not able to determine progress at this time.

TBD = To be determined. No reliable data currently exist.

Progress toward Achieving Each HK 2010 Objective

Summary of Objectives for Public Health Infrastructure	Baseline	HK 2010 Target	Mid- Decade Status	Progress	Data Source
14.7.Increase to 90 percent the proportion of <i>Healthy Kentuckians 2010</i> objectives that are tracked at a) least every three years, and b) to 60 per-	a)86.3% (2005)	a)90%	86.3% (2005)	Yes	HK 2010 Mid- Decade Review
cent the proportion of objectives that are tracked annually.	b)50%	60%	50%	Yes	
14.8. (Developmental) Increase the use of geocoding in all state health data systems to promote geographical information systems (GIS) as a tool for enhanced surveillance and data information.	In 2000 geocoding in KY health data systems was non- existent	Increase geocod- ing	In 2005 geocoding has been used in the Environ- mental Health Pro- gram and in the Epi- demiology Division	Yes	Review of geocoding section of public health data systems
14.9. Ensure access to an essential set of accurate, reliable, and timely population-based public health and environmental health laboratory services primarily in support of the Department for Public Health, but also in support of the Department of Mental Health and Mental Retardation, the Justice Cabinet, and the Labor Cabinet.	In 2001, Div. of Lab Services provided full range of lab services as mandated by statute	Ensure access to lab ser- vices	In 2005, Div. of Lab Services provided full range of lab services as mandated by statute	Yes	Review of lab ser- vices
14.10. Increase to 100 percent the proportion of local health departments that provide comprehensive epidemiology services to support core public health activities.	90% (2005)	100%	90% (2005)	N/A	Division of Epidemiol- ogy and LHDs
14.11R.Increase the proportion of state and local public health agencies that make expenditure data readily available to the public.	Not estab- lished	Increase from baseline	TBD	TBD	Survey of LHDs
14.12. (Developmental) Facilitate greater collaboration and cooperation between public and private agencies for conducting population-based prevention research.	Not estab- lished	Greater collabor- ation	TBD	TBD	
14.13. (Developmental) Maintain at 100 percent the number of state and local health agencies that use summary measures of population health.	100%	100%	100%	Target Achieved	Review of LHDs

R = Revised objective

N/A = Only baseline data are available. Not able to determine progress at this time. TBD = To be determined. No reliable data currently exist.